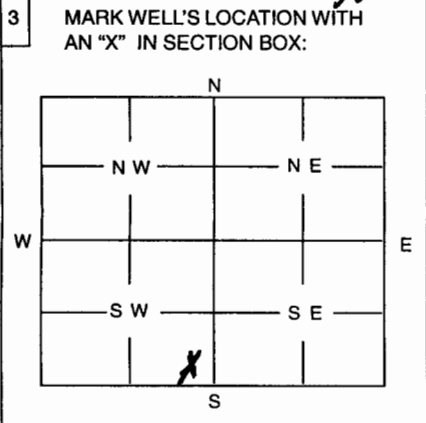


1	LOCATION OF WATER WELL: County: <u>R. Ly</u>	Fraction <u>SE 1/4 SE 1/4 SW 1/4</u>	Section Number <u>18</u>	Township Number <u>7 S.</u>	Range Number <u>5 E.</u>
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Distance and direction from nearest town or city street address of well if located within city? From Randolph Co 8 miles East on Grant Randolph Rd.

2	WATER WELL OWNER: <u>Robert &amp; Lisa Rivers</u> RR #, St. Address, Box #: <u>19765 Spring Creek Rd.</u> City, State, ZIP Code: <u>Westport, Mo 66579</u>	Board of Agriculture, Division of Water Resources Application Number: _____
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4	DEPTH OF WELL ..... <u>110'</u> <u>EW</u> ft. WELL'S STATIC WATER LEVEL ..... <u>87</u> ft. WELL WAS USED AS: <table border="0"> <tr> <td><input checked="" type="radio"/> 1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td><input type="radio"/> 2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td><input type="radio"/> 3 Feedlot</td> <td>7 Domestic (Lawn &amp; Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td><input type="radio"/> 4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other .....</td> </tr> </table>	<input checked="" type="radio"/> 1 Domestic	5 Public Water Supply	9 Dewatering	<input type="radio"/> 2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	<input type="radio"/> 3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	<input type="radio"/> 4 Industrial	8 Air Conditioning	12 Other .....
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Was a chemical / bacteriological sample submitted to Department? Yes ..... No <input checked="" type="checkbox"/> ..... If yes, mo/day/yr sample was submitted .....													
Water Well Disinfected: Yes <input checked="" type="checkbox"/> No .....													

5	TYPE OF BLANK CASING USED: <table border="0"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (Specify below) <u>Galvanized</u></td> </tr> <tr> <td>2 PVC</td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table>	1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below) <u>Galvanized</u>	2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	
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2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile								
Blank casing diameter ..... <u>5</u> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No ..... If yes, how much .....											
Casing height above or below land surface ..... <u>20'</u> <u>below</u>											

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other .....																				
Grout Plug Intervals: From <u>3</u> ft. to <u>87</u> ft., From ..... ft. to ..... ft., From ..... to ..... ft.																					
What is the nearest source of possible contamination: <table border="0"> <tr> <td><input type="radio"/> 1 Septic tank</td> <td><input type="radio"/> 6 Seepage pit</td> <td><input type="radio"/> 11 Fuel storage</td> <td><input type="radio"/> 16 Other (specify below)</td> </tr> <tr> <td><input type="radio"/> 2 Sewer lines</td> <td><input type="radio"/> 7 Pit privy</td> <td><input type="radio"/> 12 Fertilizer storage</td> <td></td> </tr> <tr> <td><input type="radio"/> 3 Watertight sewer lines</td> <td><input type="radio"/> 8 Sewage lagoon</td> <td><input type="radio"/> 13 Insecticide storage</td> <td></td> </tr> <tr> <td><input checked="" type="radio"/> 4 Lateral lines</td> <td><input type="radio"/> 9 Feedyard</td> <td><input type="radio"/> 14 Abandoned water well</td> <td></td> </tr> <tr> <td><input type="radio"/> 5 Cess Pool</td> <td><input type="radio"/> 10 Livestock pens</td> <td><input type="radio"/> 15 Oil well/Gas well</td> <td></td> </tr> </table>		<input type="radio"/> 1 Septic tank	<input type="radio"/> 6 Seepage pit	<input type="radio"/> 11 Fuel storage	<input type="radio"/> 16 Other (specify below)	<input type="radio"/> 2 Sewer lines	<input type="radio"/> 7 Pit privy	<input type="radio"/> 12 Fertilizer storage		<input type="radio"/> 3 Watertight sewer lines	<input type="radio"/> 8 Sewage lagoon	<input type="radio"/> 13 Insecticide storage		<input checked="" type="radio"/> 4 Lateral lines	<input type="radio"/> 9 Feedyard	<input type="radio"/> 14 Abandoned water well		<input type="radio"/> 5 Cess Pool	<input type="radio"/> 10 Livestock pens	<input type="radio"/> 15 Oil well/Gas well	
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Direction from well? <u>North East</u> How many feet? <u>110'</u>																					

FROM	TO	PLUGGING MATERIALS
<u>0</u>	<u>3</u>	<u>Compacted Clay</u>
<u>3</u>	<u>87</u>	<u>BENTONITE</u>
<u>87</u>	<u>110</u>	<u>GLACIATED SAND &amp; GRAVEL</u>

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>6/8/2006</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>451</u> This Water Well Record was completed on (mo/day/year) <u>6/30/2006</u> by (signature) <u>Clay W. CWD/PT</u> <u>Haldeman Well Drilling</u>
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INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.